


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 04, 2004 8:00 am**  
**Secretary of State**

02-04-2004 90083 026 \*\*\*150.00

<b>DOCUMENT # P02000025410</b> 1. Entity Name <b>BEAN AND BUTKUS ASSOCIATES, INC.</b>					
Principal Place of Business <b>8 PINEHURST PLACE ROTONDA WEST FL 33947</b>			Mailing Address <b>8 PINEHURST PLACE ROTONDA WEST FL 33947</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	4. FEI Number <b>01-0605730</b>		
5. Certificate of Status Desired <input type="checkbox"/>			Applied For <input type="checkbox"/> Not Applicable		
6. Name and Address of Current Registered Agent  <b>WHIGHAM, DAVID L ESQ. 18401 MURDOCK CIRCLE PORT CHARLOTTE FL 33948</b>					
7. Name and Address of New Registered Agent Name <b>GREGORY RINEER</b> Street Address (P.O. Box Number is Not Acceptable) <b>8 PINEHURST PLACE</b> City <b>ROTONDA WEST</b> FL <b>33947</b>					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <u><i>Gregory Rineer</i></u> <b>President</b> <span style="float: right;">1-29-04</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>RIBGER, GREGORY</b> <b>8 PINEHURST PLACE</b> <b>ROTONDA WEST FL 33947</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>RINEER, GREGORY</b> <b>8 PINEHURST PLACE</b> <b>ROTONDA WEST FL 33947</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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MOORE CR2E034 (11/03)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *GREGORY RINEER* **Gregory Rineer** 1-29-04 941-697-4839  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #